AMENDED IN ASSEMBLY MAY 11, 2000 AMENDED IN SENATE APRIL 21, 1999 AMENDED IN SENATE MARCH 15, 1999

SENATE BILL

No. 180

Introduced by Senator Sher (Coauthor: Senator Dunn)

January 13, 1999

An act to amend Section 12693.32 of the Insurance Code, and to amend Section 14067 of the Welfare and Institutions Code, relating to children's health insurance. An act to amend Section 114145 of, and to add Sections 113946 and 113947 to, the Health and Safety Code, relating to environmental health.

LEGISLATIVE COUNSEL'S DIGEST

SB 180, as amended, Sher. Healthy Families Program Retail food facilities inspection information.

Existing law, the California Uniform Retail Food Facilities Law, provides for the regulation of health and sanitation standards for retail food facilities by the State Department of Health Services. Violation of any of these provisions is a crime.

This bill would require the State Department of Health Services, in consultation with local environmental health officers, representatives of the retail food industry, and other interested parties, on or before January 1, 2002, to establish standardized uniform procedures for local health agencies to report information to the department regarding each food facility inspection, reinspection, date of last inspection, period of any closure, and the facility name and address. It would

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require the department, within 60 days after it has established the standardized uniform procedures, to provide a written report disclosing these procedures to specified parties.

This bill would also require the department, on or before January 1, 2002, to establish a standardized uniform food facility inspection format.

This bill would require each local health agency, commencing July 1, 2002, to submit food facility inspection information to the department in accordance with these procedures. The imposition of this new requirement on local agencies would create a state-mandated local program. Furthermore, since a violation of the provisions applicable to retail food facilities is a crime, this bill would impose a state-mandated local program.

Existing law requires each food establishment, except produce stands and swap meet prepackaged food stands, to be fully enclosed, in a building meeting specified criteria. Existing law excludes dining areas or open-air barbecue facilities, and outdoor displays that meet specified requirements.

This bill would additionally exclude outdoor bars contiguous with a fully enclosed food establishment under the constant and complete control of the operator of the food establishment from the above enclosure requirements.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for specified reasons.

Existing law creates the Healthy Families Program, administered by the Managed Risk Medical Insurance Board, to arrange for the provision of health care coverage, including dental and vision care, to children older than 12 months and less than 19 years of age who meet certain criteria, including having a gross annual household income equal to or less than 200% of the federal poverty level, and meeting citizenship and immigration requirements. Existing law requires the State Department of Health Services, in conjunction with the board, to develop and conduct a community outreach and

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education campaign to help families learn about, and apply for, the Medi-Cal program and the Healthy Families Program. Existing law authorizes the board, as part of its community outreach and education campaign, to include community-based face-to-face initiatives to educate potentially eligible applicants about the program and to assist them in the application process.

This bill would instead require the board, in conjunction with the department, to include these community-based face-to-face initiatives as part of its education and outreach campaign. This bill would also require the department, in conjunction with the board, to award \$5,000,000 in contracts in the 1999-2000 fiscal year, and in each subsequent fiscal year, to community-based organizations to help families learn about, and enroll in, Medi-Cal, Healthy Families, and other health care programs for low-income children, using specified existing state and federal funds appropriated for outreach purposes, and expressing the Legislature's intent for redirection of those funds for the 1999-2000 fiscal year. This bill would also require the department, in conjunction with the board, to contract with an independent entity to evaluate the state's Medi-Cal and Healthy Families programs outreach and education campaign, with the evaluation to be completed by June 1, 2000.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no yes.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 12693.32 of the Insurance Code
- 2 SECTION 1. The Legislature hereby finds and 3 declares all of the following:
- 4 (a) Food facility inspection information is currently 5 developed by each local health agency. The form, scope,
- 5 and content of food facility inspection information varies
- 7 from agency to agency. These various methods of
- 8 reporting food facility inspection information can be
- 8 reporting joba jacitity inspection information can be
- 9 confusing to food facility owners, public agencies, and the 10 public.

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event that food (b) In the facility inspection information is made available in a standardized format, it will be easier for local health agencies to compare and 4 evaluate inspection information, the and 5 Department of Health Services will be better able to 6 evaluate local health agency inspection programs.

- (c) If food facility inspection information is provided 8 in a standardized, uniform format that food facilities, public agencies, and the public could then use, this 10 standard approach would enable food facilities, public agencies, and the public, to save time and money that is 12 now spent in reviewing and evaluating inconsistent 13 information.
- (d) Standardization of food facility inspection formats 15 and reporting procedures will increase compliance by 16 food facility operators and thereby decrease the risk of food-borne illnesses.
- SEC. 2. Section 113946 is added to the Health and 18 Safety Code, to read: 19
- 113946. (a) On or before January 1, 2002, the 21 department shall establish, and each local health agency shall utilize, a standardized, uniform food facility 23 inspection format for food facility inspections that 24 includes all of the following:
- (1) The name and address of the food facility. 25
 - (2) Identification of the following inspection criteria, which shall be the basis of the inspection report:
 - (A) Improper holding temperatures.
 - (B) Inadequate cooking.

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- (C) Poor personal hygiene of food handlers.
- (D) Contaminated equipment.
- (E) Food from unsafe sources. 32
- 33 (F) Any other violation of this chapter, which shall be 34 identified by reference to items and sections of this part, or the regulations adopted pursuant to this part, relating 36 to those items.
- (3) *For* each violation identified pursuant 37 38 paragraph (2), classification of the violation as a "minor violation" or "major violation." Major violations are those 40 violations that pose an imminent risk to public health and

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1 warrant immediate closure of the food establishment or immediate correction. Minor violations are those that do not pose an imminent public health risk, but do warrant correction.

- (b) A copy of the most recent inspection report shall 6 be maintained at the food facility. The food facility shall post a notice advising patrons that a copy of the most recent inspection report is available for review by interested parties.
 - (c) The department and local health agencies shall conduct routine training on food facility inspection standardization to promote the uniform application of inspection procedures.
- (d) This section shall not restrict the ability of a local 15 health agency to inspect and report on matters other than 16 *matters subject to regulation under this chapter.*
 - SEC. 3. Section 113947 is added to the Health and Safety Code, to read:
- 113947. (a) On or before January 1, 2002, 20 department, in consultation with local environmental 21 health officers, representatives of the retail food industry, 22 and other interested parties, shall establish standardized 23 uniform procedures for local health agencies to report the 24 following food facility inspection information regarding 25 each food facility:
 - (1) Name and address.

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- (2) Date of last inspection.
- (3) Identification of any major violation identified in 29 a food facility inspection.
 - (4) Reinspection date, if applicable.
 - (5) Period of closure, if applicable.
- (b) The department. local in consultation with 33 environmental health officers, representatives 34 retail food industry, and other interested parties, may 35 periodically review and revise the standardized uniform 36 procedures established pursuant to subdivision (a). In 37 making any revisions, the department shall strive to 38 ensure that the required information can be reported and the most efficient, 39 made available in timely, 40 cost-effective manner.

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standardized (c) (1) The uniform procedures established pursuant to this section shall include a standardized uniform electronic format and protocol for 4 reporting the food facility inspection data in a timely 5 manner, and shall strive to ensure that the information is 6 readily accessible, can be rapidly reported, and, if necessary, corrected, for each food facility that has been 8 inspected or reinspected. If the local health agency 9 determines that reported information is materially in 10 error, that error shall be corrected within 48 hours after 11 that determination.

- (2) The department may also establish standardized 13 uniform procedures for reporting the information on 14 magnetic media, including, but not limited to, floppy 15 disks or magnetic tape.
- (d) Within 60 days after the department has standardized 17 established the uniform procedures 18 pursuant to this section, the department shall publish 19 these procedures.
- (e) (1) Commencing July 1, 2002, each local health 21 agency that reports food facility inspection information on an Internet web site shall report the information in 23 accordance with the standardized uniform procedures 24 established pursuant to this section.
- (2) This section shall not restrict the ability of a local 26 health agency to report on matters other than matters subject to regulation under this chapter.
- (f) The department may establish a link to each 29 Internet web site utilized by any local health agency containing the food facility inspection pursuant to subdivision (e).
- SEC. 4. Section 114145 of the Health and Safety Code 33 is amended to read:
- 114145. (a) Each food establishment, except produce 35 stands and swap meet prepackaged food stands, shall be 36 fully enclosed in a building consisting of floors, walls, and an overhead structure that meet the minimum standards prescribed by this chapter. Food establishments that are not fully enclosed on all sides and that are in operation on January 1, 1985, shall not be required to meet the

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requirement for a fully enclosed structure pursuant to this section.

- (b) This section shall not be construed to require the enclosure of any of the following:
 - (1) Dining areas.

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- (2) Open-air barbecue facilities.
- (3) Outdoor wood-burning ovens that meet all of the food preparation and safety requirements applicable to open-air barbecue facilities.
- (4) Outdoor bars continguous with a fully enclosed 11 food establishment under the constant and complete control of the operator of the food establishment.
- (5) Outdoor displays that meet all of the following 14 requirements:
- (A) Only prepackaged nonpotentially hazardous food, 16 uncut produce, or both is displayed or sold in the outdoor displays.
- (B) Outdoor displays are contiguous with a fully 19 enclosed food establishment that is in compliance with subdivision (a).
- (C) Outdoor displays have overhead protection that 22 extends over all food items.
- (D) Food items from the outdoor display are stored 24 inside a fully enclosed food establishment that is in compliance with subdivision (a) at all times other than during business hours. Any food items to be stored pursuant to this subdivision shall be stored in accordance with subdivision (a) of Section 114080.
 - (E) Outdoor displays comply with Section 114010 and have been approved by the enforcement agency.
- (F) Outdoor displays are under the constant 32 complete control of the operator of the permitted food establishment.
- 34 (c) This section shall not be construed to require the 35 enclosure during operating hours of customer self-service hazardous 36 nonpotentially bulk beverage dispensing operations that meet the following requirements: 37
- (1) The dispensing operations are installed contiguous 38 39 with a fully enclosed food establishment that is in

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compliance with subdivision (a) and operated by the food establishment.

- dispensed (2) The beverages are from enclosed that precludes exposure of the beverages equipment until they are dispensed at the nozzles.
- (3) Ice is dispensed only from an ice maker-dispenser. Ice is not scooped or manually loaded into an ice dispenser out-of-doors.
- (4) Single-service utensils protected are from 10 contamination individually and are wrapped dispensed from approved sanitary dispensers.
- (5) The dispensing operations have overhead 13 protection that fully extends over all equipment 14 associated with the facility.
- (6) During nonoperating hours dispensing the 16 operations are fully enclosed so as to be protected from contamination by vermin and exposure to the elements.
- (7) The owner or operator of the food establishment 19 demonstrates to the enforcement agency that acceptable 20 methods are in place to properly clean and sanitize the beverage dispensing equipment.
- (8) Beverage dispensing operations are in compliance 23 with Section 114010 and have been approved by the enforcement agency.
- operations (9) Beverage dispensing are under 26 constant and complete control of the permitholder of the food establishments who is operating the dispensing facility.
- (d) This section shall not be construed to allow outdoor 30 displays in violation of local ordinances.
- SEC. 5. (a) No reimbursement is required by this act 32 pursuant to Section 6 of Article XIII B of the California 33 Constitution for certain costs that may be incurred by a 34 local agency or school district because in that regard this 35 act creates a new crime or infraction, eliminates a crime 36 or infraction, or changes the penalty for a crime or 37 infraction, within the meaning of Section 17556 of the 38 Government Code, or changes the definition of a crime 39 within the meaning of Section 6 of Article XIII B of the 40 California Constitution.

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(b) No reimbursement is required by this act pursuant to Section 6 of Article XIII B of the California Constitution because a local agency or school district has the authority to levy service charges, fees, or assessments sufficient to 5 pay for the program or level of service mandated by certain other provisions of this act, within the meaning of Section 17556 of the Government Code.

is amended to read:

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- 12693.32. (a) The board may pay designated 10 individuals or organizations an application assistance fee, if the individual or organization assists an applicant to complete the program application, and the applicant is enrolled in the program as a result of the application.
 - (b) The board may establish the list of eligible individuals, or categories of individuals and organizations, the amount of the application assistance payment and rules necessary to assure the integrity of the payment process.
- (c) The board, as part of its community outreach and education campaign, shall, in conjunction with the State Department of Health Services, include community-based face-to-face initiatives to educate potentially eligible applicants about the program and to assist potential applicants in the application process. Those entities undertaking outreach efforts shall not include as part of their responsibilities the selection of a health plan and provider for the applicant. Participating plans shall be prohibited from directly, indirectly, or through their agents conducting in-person, door-to-door, 30 mail, or phone solicitation of applicants for enrollment except through employers with employees eligible to participate in the purchasing credit mechanism. However, information approved by the board on the providers and plans available to prospective subscribers 35 in their geographic areas shall be distributed through any 36 door-to-door activities for potentially eligible applicants and their children.
- SEC. 2. Section 14067 of the Welfare and Institutions 38 Code is amended to read:

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1 14067. (a) The department, in conjunction with the 2 Managed Risk Medical Insurance Board, shall develop and conduct a community outreach and education 3 campaign to help families learn about, and apply for, 4 Medi-Cal and the Healthy Families Program of the 5 Managed Risk Medical Insurance Board, subject to the 6 requirements of federal law. In conducting this eampaign, the department may seek input from, and 8 9 contract with, various entities and programs that serve 10 children, including, but not limited to, the State Department of Education, counties, Women, Infants, and 12 Children program agencies, Head Start and Healthy Start 13 programs, and community-based organizations that deal 14 with potentially eligible families and children to assist in the outreach, education, and application completion 15 16 process. 17

- (b) The outreach and education campaign shall be established and implemented as of February 18, 1998. An annual outreach plan shall be submitted to the Legislature by April 1 for each fiscal year. The plan shall address both the Medi-Cal program for children and the Healthy Families Program and, at a minimum, shall include the following:
- (1) Specific milestones and objectives to be completed for the upcoming year and their anticipated cost.
- (2) A general description of each strategy or method to be used for outreach.
- (3) Geographic areas and special populations to be targeted, if any, and why the special targeting is needed.
- (4) Coordination with other state or county education and outreach efforts.
 - (5) The results of previous year outreach efforts.
- (c) In implementing this section, the department may 34 amend any existing or future media outreach campaign contract that it has entered into pursuant to Section 36 14148.5. Notwithstanding any other provision of law, any contract entered into, or amended, as required to implement this section, shall be exempt from the approval of the Director of General Services and from the provisions of the Public Contract Code.

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(d) For the 1999–2000 fiscal year and in each subsequent fiscal year, the department, in conjunction with the Managed Risk Medical Insurance Board, shall award five million dollars (\$5,000,000) in contracts to community-based organizations to help families learn about, and enroll in, the Medi-Cal and Healthy Families programs, and other health care programs for low-income children. These contracts shall be funded using existing state and federal funds appropriated for outreach purposes.

- (1) Contracts for these outreach and enrollment projects shall be awarded based on, but not limited to, the following criteria:
- (A) Capacity to reach populations or geographic areas with disproportionately low enrollment rates. If it is not possible to estimate the number of uninsured children in a geographic area who are eligible for the Medi-Cal program or the Healthy Families Program, proxy measures for rates of eligible children may be used, including, but not limited to, the number of children in families with gross annual household incomes at or below 200 percent of the federal poverty level.
- (B) Organizational capacity and experience, including, but not limited to:
- (i) Organizational experience in serving low-income families.
- (ii) Ability to work effectively with populations that have disproportionately low enrollment rates.
- (iii) Organizational experience in helping families learn about, and enroll in, the Medi-Cal and Healthy Families programs. Organizations that do not have experience helping families learn about, and enroll in, the Medi-Cal and Healthy Families programs shall be eligible only to the extent that they support and collaborate with the outreach and enrollment activities of entities with that experience.
- (C) Effectiveness of the outreach and education plan, including, but not limited to:
- 39 (i) Culturally and linguistically appropriate outreach 40 and education strategies.

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(ii) Strategies to identify and address barriers to enrollment, such as transportation limitations and community perceptions regarding the Medi-Cal and Healthy Families programs.

- (iii) Coordination with other outreach efforts in the community, including the statewide Healthy Families and Medi-Cal programs outreach campaign, the state and federally funded county Medi-Cal outreach program, and any other Medi-Cal and Healthy Families programs outreach projects in the target community.
- (iv) Collaboration with other local organizations that serve families of eligible children.
- (v) Strategies to ensure that children and families retain coverage and are informed of options for health coverage and services when they lose eligibility for a particular program.
- (vi) Plans to inform families about all available health care programs and services.
- (2) The department, in conjunction with the Managed Risk Medical Insurance Board, shall contract with an independent entity to evaluate the state's Medi-Cal and Healthy Families programs outreach and education eampaign. The evaluation shall include, but not be limited to, the efficacy and cost-effectiveness of the 25 following elements of the campaign: (A) traditional media, including television, radio, print, and billboard advertisements, (B) public relations, including corporate sponsorships and community events, (C) the application assistance fee for community-based organizations, and (D) outreach and education contracts awarded to community organizations. The evaluation shall be completed by June 1, 2000.
- (3) To the extent permitted under federal law, 34 organizations that receive Medi-Cal and Healthy Families application assistance funding shall be eligible 36 for a grant or contract under this provision to the extent they demonstrate that the contract will fund additional outreach or education activities not supported by application assistance funding.

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(4) Outreach activities may include advertising in local media outlets to educate families about the Medi-Cal and Healthy Families programs and the importance of enrolling children in health care coverage.

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- (5) It is the intent of the Legislature that the additional duties and responsibilities added by this section are to be funded with existing statewide outreach funds.
- SEC. 3. It is the intent of the Legislature that the State 8 9 Department of Health Services in conjunction with the Managed Risk Medical Insurance Board for the 1999-2000 10 fiscal year shall identify up to five million dollars (\$5,000,000) of funds allocated for the purposes of 12 13 subdivision (a) of Section 14067 of the Welfare and Institutions Code that can be redirected to fund contracts pursuant to subdivision (d) of Section 14067 of the 15 16 Welfare and Institutions Code without causing a deficiency in contracts or legal obligations for education 17 and outreach activities funded pursuant to subdivision 18 (a) of Section 14067 of the Welfare and Institutions Code.